



General Assembly

January Session, 2001

Amendment

LCO No. 8992

Offered by:

REP. JARJURA, 74th Dist.

SEN. BOZEK, 6th Dist.

To: Subst. Senate Bill No. 1046

File No. 576

Cal. No. 585

***"AN ACT CONCERNING THE REVISOR'S CORRECTIONS TO THE
GENERAL STATUTES AND CERTAIN PUBLIC ACTS."***

1 After line 2851, insert the following and renumber the remaining
2 section accordingly:

3 "Sec. 101. Subdivisions (6) and (7) of subsection (a) of section 38a-
4 226c of the general statutes, as amended by senate bill 1060 of the
5 current session, are repealed and the following is substituted in lieu
6 thereof:

7 (6) Physicians, nurses and other licensed health professionals
8 making utilization review decisions shall have current licenses from a
9 state licensing agency in the United States or appropriate certification
10 from a recognized accreditation agency in the United States, provided,
11 any final determination not to certify an admission, service, procedure
12 or extension of stay for an enrollee within this state, except for a claim
13 brought pursuant to chapter 568, shall be made by a physician, nurse
14 or other licensed health professional under the authority of a

15 physician, nurse or other licensed health professional who has a
16 current Connecticut license from the Department of Public Health.

17 (7) In cases where an appeal to reverse a determination not to certify
18 is unsuccessful, each utilization review company shall assure that a
19 practitioner in a specialty related to the condition is reasonably
20 available to review the case. When the reason for the determination not
21 to certify is based on medical necessity, including whether a treatment
22 is experimental or investigational, each utilization review company
23 shall have the case reviewed by a physician who is a specialist in the
24 field related to the condition that is the subject of the appeal. Any such
25 review, except for a claim brought pursuant to chapter 568, that
26 upholds a final determination not to certify in the case of an enrollee
27 within this state shall be conducted by such practitioner or physician
28 under the authority of a practitioner or physician who has a current
29 Connecticut license from the Department of Public Health. The review
30 shall be completed within thirty days of the request for review. The
31 utilization review company shall be financially responsible for the
32 review and shall maintain, for the commissioner's verification,
33 documentation of the review, including the name of the reviewing
34 physician."